

OFFICE

245/01
1/25/01

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	1120
FORMALITY REVIEW	Feb	932	01-24-01
RESPONSE FORMALITY REVIEW	M.H. SG	625 1077	05-09-01 3/17/01

INDEX OF CLAIMS

- | | | | |
|---|----------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral) Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

Claim	Date
Final	
Original	
1	9/18/02
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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